

WSGL WEINGARTEN, SCHURGIN, GAGNEBIN & LEBOVICI LLP*Intellectual Property Law*
Patents • Trademarks • CopyrightsTen Post Office Square
Boston, Massachusetts 02109
Tel. 617.542.2290 • Fax. 617. 451.0313
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DATE: August 2, 2005

TO: Examiner Michael C. Henry
TC Art Unit: 1623

Fax No.: (571) 273 8300

FROM: Holliday C. Heine, Ph.D.

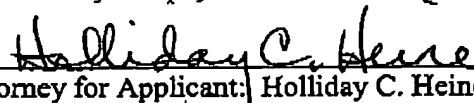
No. of pages transmitted
(including this page): 9

Our File: UPITT-008XX

Time:

Your Ref: Application No. 10/659,063
Filed Date: September 10, 2003
Confirmation No.: 3827

Sent by: Rose

A confirmation copy of this transmission will not be mailed unless the following is checked: []
MESSAGEPLEASE DELIVER DIRECTLY TO:
EXAMINER Michael C. Henry, Tel. (571) 272-0652
TC ART UNIT NO: 1623**FOR ENTRY**Enclosed for filing please find a: Response to Final Office Action including a
Request for 2 months Extension of TimeThe Commissioner is hereby authorized to Charge Deposit Account No. 23-0804 for any additional
filing fees associated with this communication or credit any overpayment.
Attorney for Applicant: Holliday C. Heine, Ph.D.
Registration No. 34,346

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Application No.: 10/659,063
 Filed: September 10, 2003
 TC Art Unit: 1623
 Confirmation No.: 3827

Rev 07/05

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 Ten Post Office Square
 Boston, Massachusetts 02109
 Telephone: (617) 542-2290
 Telecopier: (617) 451-0313

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Via Facsimile

COMMISSIONER FOR PATENTS

P.O. Box 1450

Alexandria, VA 22313-1450

Date: August 2, 2005

Attorney

Docket No.: UPITT-008XX

Sir:

In re application of: Mitchell P. Fink et al.

Entitled: EXTRACELLULAR NAD+ AND cADPR AS POTENT ANTI-INFLAMMATORY AGENTS

Transmitted herewith is an amendment in the above-identified application. The following checked items are applicable:

- ☐ This is a Request for Continued Examination under §1.114; authorization is provided herewith to charge Deposit Account No. 23-0804 for the cost of same (\$) per §1.17(e).
- ☐ Enter the unentered amendment previously filed on per §1.116.
- ☒ A Petition for Extension of Time for 2month is hereby made under §1.136(a); authorization is provided herewith to charge Deposit Account No. 23-0804 for the cost of same (\$225.00) per §1.17.
- ☒ In the event a Petition for Extension of Time is required by this paper and not otherwise provided, such Petition is hereby made and authorization is provided herewith to charge Deposit Account No. 23-0804 for the cost of such extension.
- ☐ Other:

CLAIMS AFTER AMENDMENT:	MINUS PRIOR PAID CLAIMS:	EQUALS PRESENT EXTRA CLAIMS:	RATE:	ADDITIONAL FEE:
Independent	4 - 4	= -0-	x \$200.00 =	-0-
Total	12 - 20	= -0-	x \$ 50.00 =	-0-
<input type="checkbox"/> Multiple Dependent Claims (1st presentation)			+ \$360.00 =	-0-
SUBTOTAL ADDITIONAL FEE				-0-
Small Entity filing, divide by 2. Small Entity status must be asserted.				-0-
TOTAL ADDITIONAL FEE				-0-

- ☒ No additional fee. ☐ The fee has been calculated above; authorization is provided herewith to charge Deposit Account No. 23-0804 (\$) for the cost of same.
- ☒ The Commissioner is hereby authorized to charge payment of any additional filing fees under §1.16 associated with this communication or credit any overpayment to Deposit Account No. 23-0804.

I hereby certify that this correspondence is being sent via facsimile to Examiner Michael C. Henry, TC Art Unit 1623, Fax No. (571) 273 8300, on Aug. 2, 2005.

Holliday C. Heine
 Attorney of Record: Holliday C. Heine, Ph.D.
 Registration No.: 34,346

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